

REQUEST FOR QUOTATIONS (THIS IS NOT AN ORDER)		THIS RFQ [] IS [x] IS NOT A SMALL BUSINESS- SMALL PURCHASE SET-ASIDE (52.219-4)		PAGE 1	OF 1	PAGES
1. REQUEST NO. 2196172	2. DATE ISSUED 26 Nov 2012	3. REQUISITION/PURCHASE REQUEST NO. SKV42013Q0103	4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG. 1	RATING		
5A. ISSUED BY General Services Office, US Embassy Pristina, Kosovo Nazim Hikmet 30, Pristina, Kosovo			6. DELIVER BY (Date)			
5B. FOR INFORMATION CALL: (Name and telephone no.) (No collect calls)			7. DELIVERY			
NAME ROBIN CLUNE, CONTRACTING OFFICER		TELEPHONE NUMBER AREA CODE 381 NUMBER 38/5959 3000		FOB DESTINATION X OTHER (See Schedule)		
8. TO:			9. DESTINATION			
a. NAME		b. COMPANY		a. NAME OF CONSIGNEE US EMBASSY PRISTINA		
c. STREET ADDRESS			b. STREET ADDRESS NAZIM HIKMET 30			
d. CITY		e. STATE	f. ZIP CODE	c. CITY PRISTINA, KOSOVO		
				d. STATE KS	e. ZIP CODE 10 000	
10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5A ON OR BEFORE CLOSE OF BUSINESS (Date) December 10, 2012 by 15:00 hrs		IMPORTANT: This is a request for information, and quotations furnished are not offers. If you are unable to quote, please so indicate on this form and return it to the address in Block 5A. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or services. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotations must be completed by the quoter				

11. SCHEDULE (Include applicable Federal, State and local taxes)

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
1	500 KVA Compound generator with ATS and other spare expendable parts, per attached specifications (quote should include delivery to International Village in Pristina, Kosovo)	1	EA		

12 DISCOUNT FOR PROMPT PAYMENT	a. 10 CALENDAR DAYS %	b. 20 CALENDAR DAYS %	c. 30 CALENDAR DAYS %	d. CALENDAR DAYS	
				NUMBER	%

NOTE: Additional provisions and representations [] are [] are not attached.

13 NAME AND ADDRESS OF QUOTER			14 SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION		15 DATE OF QUOTATION
a. NAME OF QUOTER					
b. STREET ADDRESS			16. SIGNER		
c. COUNTY			a. NAME (Type or print)		b. TELEPHONE
d. CITY	e. STATE	f. ZIP CODE	c. TITLE (Type or print)		AREA CODE
					NUMBER

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STANDARD FORM 18 (Rev. 6-95)
Prescribed by GSA-FAR (48 CFR) 53.215-1(a)

